

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | NO. | DATE |
|---------------------|----------|-------|----------|
| FEE DETERMINATION | W | 7534 | 10-01-99 |
| O.I.P.E. CLASSIFIER | | 2 | 10/6/99 |
| FORMALITY REVIEW | Ch | 69916 | 10/13/99 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------|---------|
| Final | |
| Original | |
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| Claim | Date |
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| Claim | Date |
|----------|------|
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If more than 150 claims or 10 actions
staple additional sheet here

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